

pg. 1 of 2

CLAIMS ONLY

CLAIMS ONLY						Application Number 10/812796	Filing Date
						Applicant(s)	
						* May be used for additional claims or amendments	
03-15-06						03-15-06	
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		
	Indep	Depend	Indep	Depend	Indep	Depend	
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							
21							
22							
23							
24							
25							
26							
27							
28							
29							
30							
31							
32							
33							
34							
35							
36							
37							
38							
39							
40							
41							
42							
43							
44							
45							
46							
47							
48							
49							
50							
Total Indep		5					
Total Depend		98					
Total Claims		103					

pg. 2 of 2

CLAIMS ONLY						Application Number	Filing Date					
						10/812796						
						Applicant(s)						
						* May be used for additional claims or amendments						
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend						
101				/			151					
102				/			152					
103				/			153					
104				/			154					
105				/			155					
106				/			156					
107				/			157					
108				/			158					
109				/			159					
110				/			160					
111				/			161					
112				/			162					
113				/			163					
114							164					
115							165					
116							166					
117							167					
118							168					
119							169					
120							170					
121							171					
122							172					
123							173					
124							174					
125							175					
126							176					
127							177					
128							178					
129							179					
130							180					
131							181					
132							182					
133							183					
134							184					
135							185					
136							186					
137							187					
138							188					
139							189					
140							190					
141							191					
142							192					
143							193					
144							194					
145							195					
146							196					
147							197					
148							198					
149							199					
150							200					
Total Indep							Total Indep					
Total Depend							Total Depend					
Total Claims							Total Claims					

(totals on pg. 1)